



Dealing with disasters

AAP leaders, experts identify strategies to help pediatricians address their own needs

by **David J. Schonfeld, M.D., FAAP**

Despite warnings of the hurricane's severity, Dr. Martens was caught off guard when flooding and strong winds devastated much of her community. Homes were uninhabitable, roadways were flooded or damaged, and electricity and phone coverage were spotty.

Dr. Martens was relieved to find her office intact. When patients started arriving with major and minor injuries, she did her best to provide first aid to all, even adults. Hours later, one nurse showed up, and they worked long into the night.

The next few weeks were tough. Her partner's home was destroyed, and he spent much of the time helping his family relocate. Several staff also couldn't find temporary housing. Dr. Martens' house was damaged, so her family moved in with relatives.

She put in long hours at the office, working under austere conditions. The emergency generator couldn't support the air conditioning, and the office was hot and muggy. She saw more patients than usual with half the staff. When new patients came, she couldn't turn them away even if she didn't take their insurance or they had no insurance.

Everyone needed more from her, but few thanked her. She had little time to see her family. She was up late every night, had trouble falling asleep and ate poorly. She worried that she was neglecting the office finances but couldn't take time to determine how much her practice was losing. Colleagues out of the area advised her to exercise, eat well, rest and take time off to recharge. None of that seemed feasible; it only made her feel more overwhelmed.

Situations like this are not unusual for pediatricians in communities devastated by a disaster. They may work in difficult conditions; provide care with limited support or resources; make medical decisions in situations for which they have less experience and confidence; work longer hours; face financial and other business challenges; manage employees/staff who are distressed and overwhelmed themselves; and worry about addressing the needs of their own family.

Professional self-care is vital in the aftermath of a disaster but hard to address with limited resources.

The Academy is committed to identifying strategies to support members in times of need. It brought together experts, Academy leaders and practitioners from communities stricken by disasters to identify steps the organization could take to promote professional self-care among members.

The group identified the following strategies that might assist practitioners in communities recovering from a disaster:

- **Offer practical assistance:** Pediatricians not affected by the disaster can offer to handle some well-child exams, non-emergency cases, or teaching or administrative responsibilities until things settle down. They

also can help with personal responsibilities, such as meal preparation, transportation for children or arrangements for home repairs. A general offer to help out is nice, but it's better to suggest doing something specific, too.

- **Leaders should reach out directly:** AAP leaders, community leaders or colleagues can contact practitioners in affected communities to express compassion and support. Continue this over time, not just in the first few days or weeks.

- **Work within the systems of care:** Consult with local health care providers about how to be of assistance. Establishing a free clinic may decrease the success of a practice that is struggling to rebuild its business. Starting a service that is discontinued later may hinder long-term recovery.

- **Share expertise, experience:** Discussions with practitioners who survived a similar disaster can lead to practical advice of immediate value and help restore faith that recovery will occur. Timely, free consultation by content experts can be invaluable.

- **Keep checking in:** Weekly evening "pediatric recovery calls" for practitioners to share how they are doing and/or adding a check-in portion to standing calls or in-person meetings can provide opportunities for professionals to share and receive support.

Some well-intentioned actions, however, may not be helpful.

- Having too many people converge on a chaotic scene to offer assistance may be disruptive, especially when politics get in the way. Too many messages and too much information can be hard to filter.
- Be sure not to burden those in need with hosting your visit or making arrangements for you when you come to help.
- Give thanks but don't give awards. Pediatricians typically wish they could have done more to save lives or prevent injuries and may feel uncomfortable with media attention or public praise. Convey your appreciation and admiration for the team's efforts and acknowledge that they did the best they could in a difficult situation.

In the aftermath of a disaster, pediatricians generally do what they do every day — serve others in need. Neglecting personal needs may be common, but it isn't wise. The Academy is committed to identifying strategies to support its members by providing expertise, resources and advocacy. Promoting professional self-care is an important component of this work.



Dr. Schonfeld is a member of the AAP Disaster Preparedness Advisory Council.